

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF <i>Lee</i>	COURT CASE NUMBER <i>CV-00-486</i>
DEFENDANT <i>USA</i>	TYPE OF PROCESS <i>SAC</i>

SERVE ➔ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <i>U.S. Attorney</i>
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <i>Federal Building, Williamsport</i>

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be served with this Form - 285
	Number of parties to be served in this case
	Check for service on U.S.A. FILED

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

FILED**NOV 20 2000****DEPUTY CLERK**

Signature of Attorney or other Originator requesting service on behalf of: <i>[Signature]</i>	<input type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. <i>67</i>	District to Serve No. <i>67</i>	Signature of Authorized USMS Deputy or Clerk <i>A. Lavelle</i>	Date <i>9/21/00</i>
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above) <i>Linda Warner for U.S. Attorney</i>	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service <i>Sept 21, 2000</i> <i>4:45</i> am <i>pm</i>
	Signature of U.S. Marshal or Deputy <i>[Signature]</i>

Service Fee <i>45.00</i>	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges <i>45.00</i>	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

200 OCT -2 AM 9:36

RECEIVED
USMS, MIDDLE/PA

U.S. Department of Justice
United States Marshals Service

RETURN
of Process by the U.S. Marshal
Form.

PLAINTIFF

Lee

COURT CASE NUMBER

CV-00-486

DEFENDANT

USA

TYPE OF PROCESS

Sub

SERVE

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

Kathleen M. Hawk-Sawyer, Director

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

AT

BOP, 320 First St. Washington DC 20534

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

Number of process to be served with this Form - 285

Number of parties to be served in this case

for service

A.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kathleen Hawk-Sawyer
DIRECTORU. S. BUREAU OF PRISONS
320 1st STREET, N. W.
WASHINGTON, D.C. 20537

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

9/27/00

C. Signature

K. Hawk-Sawyer

☐ Agent☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

ONE NUMBER

DATE

WRITE BELOW THIS LINE

Deputy or Clerk

Date

9/21/00

2. Article Number (Copy from service label)

7099 3400 0003 08348545

CV-00-486

102595-99-M-1789

PS Form 3811, July 1999

Domestic Return Receipt

When in "Remarks", the process described etc., shown at the address inserted below.

I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service

Time

am

9/27/00

pm

Signature of U.S. Marshal or Deputy

P. L. Farrell

Service Fee

Total Mileage Charges
(including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount owed to U.S. Marshal or

Amount of Refund

8.00

8.00

REMARKS:

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Seizure of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF <i>Lee</i>	COURT CASE NUMBER <i>CV-00-486</i>
DEFENDANT <i>USA</i>	TYPE OF PROCESS <i>See</i>

SERVE ➔ AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <i>BOP, 320 First St., NW</i>
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <i>Washington, DC 20534</i>

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be served with this Form - 285
	Number of parties to be served in this case

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mail piece, or on the front if space permits.

1. Article Addressed to:

~~Director~~
U. S. BUREAU OF PRISONS
320 1st STREET, N. W.
WASHINGTON, D.C. 20537

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *9/27/00*
- B. Date of Delivery *9/27/00*
- C. Signature *[Signature]*
- D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

Business and Alternate Addresses, All

Fold

3. Service Type
- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

NUMBER

DATE

WRITE BELOW THIS LINE

Duty or Clerk

Date

2. Article Number (Copy from service label)

7099 3400 0003 0834 8606

PS Form 3811, July 1999

Domestic Return Receipt

CV-00-486

102595-99-M-1789

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of, on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Address (complete only if different than shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Date of Service <i>9/27</i>	Time am pm
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Signature of U.S. Marshal or Deputy

[Signature]

Service Fee <i>8.00</i>	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges <i>8.00</i>	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
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REMARKS:

Original
UNITED STATES DISTRICT COURT
MIDDLE DISTRICT OF PENNSYLVANIA

SUMMONS IN A CIVIL ACTION

Lee
Plaintiff
V.

CASE NUMBER: 1:00-cv-00486

United States of Ame
Defendant

TO:
(SEE COMPLAINT)

YOU ARE HEREBY SUMMONED and required to file with the Clerk of this Court
and serve upon

Plaintiff's Attorney:

Paul Lee
FCI-ALLENWOOD
01656-087
P.O. Box 2000
White Deer, PA 17887

an answer to the complaint which is herewith served upon you, within
(60) SIXTY DAYS after service of this summons upon you, exclusive of the
day of service. If you fail to do so, judgment by default will be taken
against you for the relief demanded in the complaint.

MARY E. D'ANDREA, Clerk

BY: *Christine Luvella*
Deputy Clerk

DATE: September 20, 2000

RECEIVED
U.S. MIDDLE DISTRICT
SEP 20 PM 4:20

UNITED STATES DISTRICT COURT
MIDDLE DISTRICT OF PENNSYLVANIA

SUMMONS IN A CIVIL ACTION

PARTIES FOR CASE #1:00-cv-00486

Paul Lee
 plaintiff

v.

United States of America
 defendant
Kathleen M. Hawk-Sawyer
 defendant
Bureau of Prisons
 defendant

RETURN OF SERVICE - Case # 00-cv-00486

Service of the Summons and Complaint was made by me *	DATE
NAME OF SERVER (Print)	TITLE
Check one box below to indicate method of service	
<input type="checkbox"/> Served personally upon the defendant. Place where served: _____ <input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. Name of person with whom the summons and complaint were left: _____ <input type="checkbox"/> Returned unexecuted: _____ <input type="checkbox"/> Other (specify): _____ _____ _____	
STATEMENT OF SERVICE FEES	
TRAVEL	SERVICES
	TOTAL
DECLARATION OF SERVER	
<p>I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.</p> <p>Executed on _____ Date _____ Signature of Server _____</p> <p style="text-align: right;">_____ Address of Server _____</p>	

*) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure